



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E267834**

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INTERSTATE	<input type="checkbox"/>	CITY STREET	<input type="checkbox"/>	FIRE RESULTED	<input type="checkbox"/>
STATE ROUTE	<input checked="" type="checkbox"/>	OTHER	<input type="checkbox"/>	STOLEN VEHICLE	<input type="checkbox"/>
COUNTY RD	<input type="checkbox"/>	PRIVATE WAY	<input type="checkbox"/>	HIT & RUN INVOLVED	<input type="checkbox"/>

TRIBAL RESERVATION	
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CASE #	13-02202
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LOCAL AGENCY CODING	0664
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TOTAL # OF UNITS	02	OBJECT STRUCK	
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DATE OF COLLISION	09 - 04 - 2013	TIME (2400)	1937	COUNTY #	31	MILES		N	<input type="checkbox"/>	E	<input type="checkbox"/>	IN	<input checked="" type="checkbox"/>	CITY #	0664
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ON (PRIMARY TRAFFIC WAY)	INTERSECTION	<input checked="" type="checkbox"/>	NON-INTERSECTION	<input type="checkbox"/>
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SR 92	BLOCK NO.	<input checked="" type="checkbox"/>	9300	MILE POST	
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DISTANCE		MILES	<input type="checkbox"/>	N	<input type="checkbox"/>	E	<input type="checkbox"/>	OF (REFERENCE OR CROSS STREET)	LAKE DR	S	<input type="checkbox"/>	W	<input type="checkbox"/>
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UNIT 01	MOTOR VEHICLE	<input checked="" type="checkbox"/>	PEDAL CYCLE	<input type="checkbox"/>	DAMAGE THRESHOLD MET	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	PHONE	
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LAST NAME	SHETLER	FIRST NAME	NATHEN	MIDDLE INITIAL	A
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STREET NEW ADDRESS	17319 ENGBRETSSEN RD
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CITY	GRANITE FALLS	ST	WA	ZIP	982528608
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CDL		RESTRICTIONS		ENDORSEMENTS	
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DRIVER'S LICENSE #	SHETLNA154C0	STATE	WA	SEX	M	D.O.B.	MMDDYYYY	02	-	20	-	1985
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ON DUTY	<input type="checkbox"/>	STATUS		AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE		INJURY CLASS	1	NATURE OF INJURIES	
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LICENSE PLATE #	ABY3065	STATE	WA	VIN#	JN1HS36PXXK2022464
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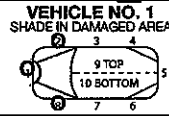
TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	1989	MAKE	NISS	MODEL	240SX	STYLE	2H	VEHICLE TOWED	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	TOWED BY	DICK'S TOWING	GOVT. VEHICLE	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
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REGISTERED OWNER INFO.	
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LIABILITY INSURANCE IN EFFECT	<input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	STATE FARM 202 0882-E21-47
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VEHICLE LEGALLY STANDING	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	CITATION #		CHARGE	
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UNIT 02	MOTOR VEHICLE	<input checked="" type="checkbox"/>	PEDAL CYCLE	<input type="checkbox"/>	PEDESTRIAN	<input type="checkbox"/>	PROPERTY OWNER	<input type="checkbox"/>	DAMAGE THRESHOLD MET	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	PHONE	
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LAST NAME	FLETCHER	FIRST NAME	SHIRLEY	MIDDLE INITIAL	L
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STREET NEW ADDRESS	5322 86TH PL NE
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CITY	MARYSVILLE	ST	WA	ZIP	982703033
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CDL		RESTRICTIONS		ENDORSEMENTS	
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DRIVER'S LICENSE #	FLETCSL429CE	STATE	WA	SEX	F	D.O.B.	MMDDYYYY	02	-	05	-	1958
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ON DUTY	<input type="checkbox"/>	STATUS		AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE		INJURY CLASS	7	NATURE OF INJURIES	COMPLAINT OF NECK AND BACK PAIN
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LICENSE PLATE #	B63784U	STATE	WA	VIN#	1FTRF12W95KC59109
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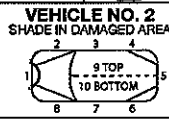
TRAILER PLATE #	4296VI	STATE	WA	TRAILER PLATE #		STATE	
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VEH. YEAR	2005	MAKE	FORD	MODEL	F150	STYLE	PK	VEHICLE TOWED	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	TOWED BY		GOVT. VEHICLE	YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
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REGISTERED OWNER INFO.	MARSHBANK INC PO BOX 97 LAKE STEVENS WA 98258
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LIABILITY INSURANCE IN EFFECT	<input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	TRANSPORTATION INS 2094249152
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VEHICLE LEGALLY STANDING	YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>	CITATION #		CHARGE	
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OFFICER'S NAME (PRINT)	KERRY BERNHARD	BADGE OR ID #	120	AGENCY	WA0311900
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STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E267834**

CASE # **13-02202**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)		REMKE JAYMN M																
ADDRESS & PHONE #		1909 21 ST EVERETT WA 98201 4259031664																
PASSENGER	<input checked="" type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #	2	SEAT POS.	3	AIRBAG	2	RESTR.	4	EJECT	1	HELMET USE		INJURY CLASS	7	NATURE OF INJURIES COMPLAINT OF NECK AND BACK PAIN
NAME (LAST, FIRST, MIDDLE INITIAL)																		
ADDRESS & PHONE #																		
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES
NAME (LAST, FIRST, MIDDLE INITIAL)																		
ADDRESS & PHONE #																		
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES

NARRATIVE

On 9/4/2013 at approximately 1937 hours, Unit 2 was stopped in the westbound lane of traffic on SR 92 at the intersections of Lake Dr in the City of Lake Stevens. Unit 2 was stopped for traffic to make a left turn onto Lake Dr. Unit 2 was towing a flat bed trailer. Unit 1 was traveling westbound on SR 92. The driver of Unit 1 did not notice Unit 2 stopped in the lane of travel and rear ended Unit 2, striking the trailer.

Unit 1 underrode Unit 2's trailer. Unit 1 sustained heavy front end damage and was towed from the scene. The driver and passenger of Unit 2 complained of neck and back pain but declined Aide.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

KERRY BERNHARD

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

09-05-13 05:35 AM

DATED

PLACE SIGNED

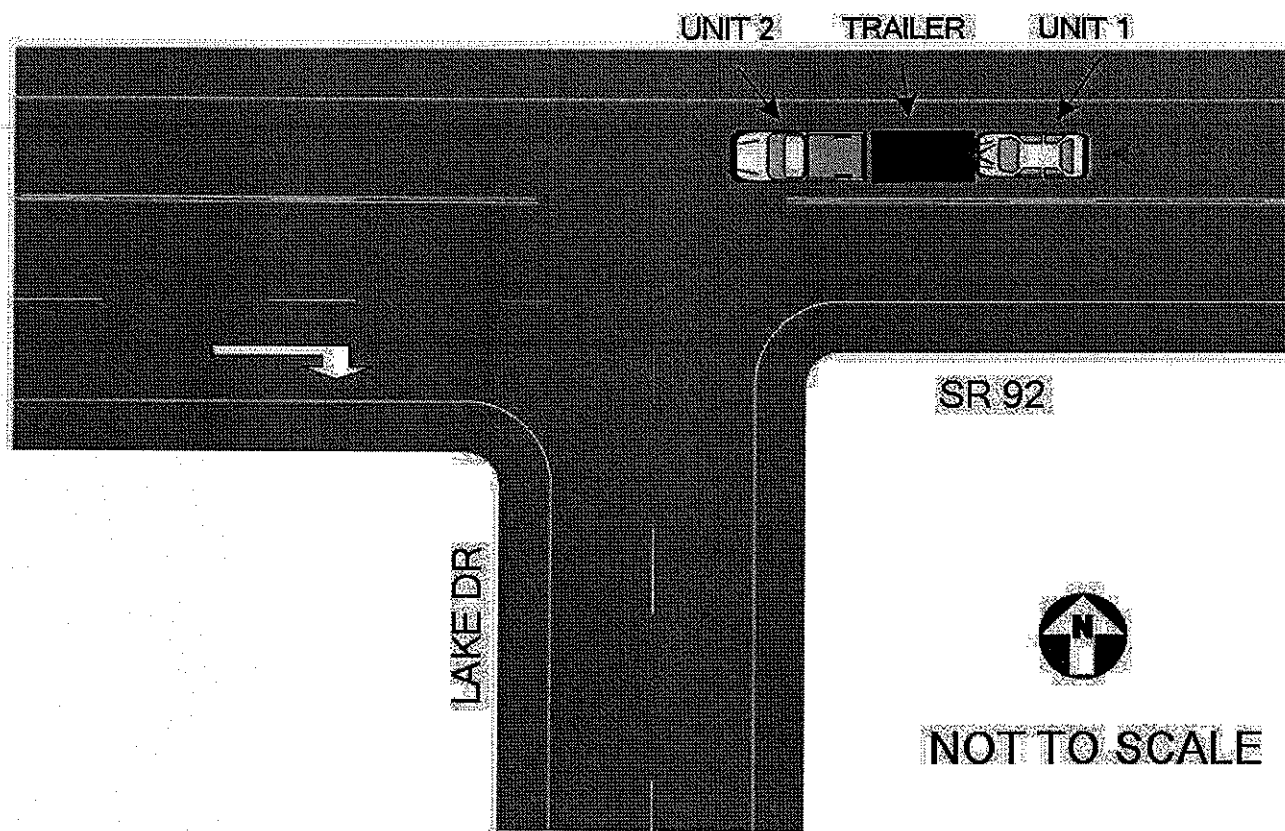
APPROVED BY

BOB SUMMERS 079

DATE

9/5/2013 2:50:44 PM

BADGE OR ID #	120	ORI #	WA0311900	TIME POLICE DISPATCHED	7:38 PM	TIME POLICE ARRIVED	7:43 PM
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LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER 13-2202



VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Fletcher, Shirley L.	RACE W	ETH	SEX F	DOB 2-5-58	AGE 55	HGT 4'11"	WGT 115	HAIR B	EYES B
STREET ADDRESS PO BOX 3193		CITY Arlington		STATE WA		ZIP 98223		RES. STATUS W		
HOME PHONE L		CELL PHONE 425-508-0998			PLACE OF EMPLOYMENT Marshbank Construction					
WORK PHONE		EMAIL ADDRESS C								

I, _____, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED. Sept. 4. 2013

7:30 PM

While at work hauling light plants for flaggers w/ trailer on, was traveling west bound on Hwy 92 & Lake Dr. turning around to drop off another light plant. Stopped for E Bound traffic to clear & make turn onto Lake Dr & turn around. Blinky on & 4 way flashers on, I was rear ended by white little car. Jaymn Remke was in truck helping me & we both felt the impact in our necks. The white car did skid on brakes as he was almost to the back of trailer, maybe 20'.

Damage to the Marshbank truck & trailer Ford PN Lic# B63784U & trailer Lic# 4296-VI

LSPD ORIGINAL

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE <i>Shirley L. Fletcher</i>	DATE SIGNED Sept 4. 2013	LOCATION SIGNED
OFFICER/NUMBER K. BERNHARD #720	DATE SIGNED 9-4-13	LOCATION SIGNED LK STEVENS, WA

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE 1 OF 1

LAKE STEVENS POLICE DEPARTMENT

VICTIM/WITNESS STATEMENT

CASE NUMBER

13-02202

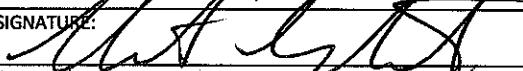
VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Snetter A Nathan	RACE W	ETH	SEX M	DOB 02/20/85	AGE 28	HGT 5'10"	WGT 270	HAIR RED	EYES BLU
STREET ADDRESS 17319 engebretsen RD		CITY Granite Falls		STATE WA		ZIP 98258		RES. STATUS WA		
HOME PHONE 360 691 6090		CELL PHONE 360 393 2396		PLACE OF EMPLOYMENT wrecking ball demo						
WORK PHONE		EMAIL ADDRESS								

I, Nathan Snetter, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

I was Traveling down SR 92 about 40mph when a marshbank truck & trailer was turning onto lake drive I did not see a blinker or lights on the trailer and I skidded Right into the back of the trailer wrecking the front of my car. then I pulled onto lake drive and stopped while they turned around and went to drop the trailer for some reason and they came back while i waited then the officer showed up I have no injuries of any kind. The trailer was empty with nothing on it The truck had a lady driver, and one pass about my age

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: 	DATE SIGNED 9/9/13	LOCATION SIGNED ORIGINAL
OFFICER NUMBER: L. BERNHARD #120	DATE SIGNED 9-9-13	LOCATION SIGNED LAKE STEVENS, WA

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE 1 OF 1

LAKE STEVENS POLICE EVIDENCE UNIT		Primary Officer/Badge Number K. BERNHARD #120		Case Number 13-02202	
Type of Crime: Felony / Misdemeanor (Circle)		Type of Case: ACCIDENT		Date/Time: 9-4-13 0407	
Action Number: 3 - EVIDENCE; 5 - FOUND; 10 - SAFEKEEPING		*Evidence will be held until court disposition or when the Statute of Limitations has expired *Found and Safekeeping will be held for 60 days or 60 days past owner notification			
Item # KB-1 Action # 3	Item PHOTO CD		Brand Name		Storage Location
	Brand/Model/Caliber (Further Description)				
	Serial #	Where Found	Weight of Narcotic		
Owner's Name LSPD		Address		City	State
				Zip	Phone #
Barcode goes here					
Owner Signature/Other remarks /additional information/ special instructions #120					
Item #	Item		Brand Name		Storage Location
	Brand/Model/Caliber (Further Description)				
	Serial #	Where Found	Weight of Narcotic		
Action #					Disposition
Owner's Name		Address		City	State
				Zip	Phone #
Barcode goes here					
Owner Signature/Other remarks /additional information/ special instructions					
Item #	Item		Brand Name		Storage Location
	Brand/Model/Caliber (Further Description)				
	Serial #	Where Found	Weight of Narcotic		
Action #					Disposition
Owner's Name		Address		City	State
				Zip	Phone #
Barcode goes here					
Owner Signature/Other remarks /additional information/ special instructions					
Item #	Item		Brand Name		Storage Location
	Brand/Model/Caliber (Further Description)				
	Serial #	Where Found	Weight of Narcotic		
Action #					Disposition
Owner's Name		Address		City	State
				Zip	Phone #
Barcode goes here					
Owner Signature/Other remarks /additional information/ special instructions					
Item #	Item		Brand Name		Storage Location
	Brand/Model/Caliber (Further Description)				
	Serial #	Where Found	Weight of Narcotic		
Action #					Disposition
Owner's Name		Address		City	State
				Zip	Phone #
Barcode goes here					
Owner Signature/Other remarks /additional information/ special instructions					
Item #	Item		Brand Name		Storage Location
	Brand/Model/Caliber (Further Description)				
	Serial #	Where Found	Weight of Narcotic		
Action #					Disposition
Owner's Name		Address		City	State
				Zip	Phone #
Barcode goes here					
Owner Signature/Other remarks /additional information/ special instructions					
Evidence Control Use Only:					
Received by Evidence:		NCIC/WACIC <input checked="" type="checkbox"/> Date:		CAD/RMS Checked	
Name: _____ # _____		NCIC/WACIC + Date:		Owner Letter Sent:	
Date: _____ Time: _____		NCIC/WACIC - Date:		Owner Letter Sent:	
ROUTING: LSPD ORIGINAL White: Property Room Yellow: Case File					

Incident History for: #SS13019800 Xref: #AG13002554

Case Numbers: \$SS13002202

Received 09/04/13 19:37:23 BY SPDF27 SP0137
Entered 09/04/13 19:37:47 BY SPDF27 SP0137
Dispatched 09/04/13 19:38:34 BY SPDP17 SP0203
Enroute 09/04/13 19:38:34
Onscene 09/04/13 19:43:44
Closed 09/04/13 20:19:51

Initial Type: ACC Initial Alarm Level: Final Alarm Level:

Final Type: ACC (ACCIDENT, NON-INJURY OR UNKNOWN) Pri: 2 Dispo: H

Police BLK: SS001 Fire BLK: AG1718 Map Page: 377E-4 Group: SSI Beat: NORT

Src: 9

Loc: LAKE DR/SR 92 , LKS (V)

Loc Info: T MOBILE USA,

Name: SHIRLEY-MARSH BANK

Addr: CONSTRUCTION

Phone: 4256336861

/1937 (SP0137) ENTRY , UNK INJ ACC
/1937 CROSS #AG13002554
/1938 (SP0203) AGCADV , 1930
/1938 VIEWED
/1938 (SP0137) SUPP PHO: 4255080998,
TXT: WHI NISSAN 240 VS WHI PU W/TRAILER , NON BL
KING
/1938 (SP0203) DISPER SS1940 #SS120 BERNHARD, OFFICER (KERRY)
/1943 ONSCNE SS1940
/1944 (*****) REMINQ SS1940 ABY3065
/1944 (SP0203) REMINQ SS1940 LIC, 1940, ABY3065, , ,
/1950 (SS120) REMINQ SS1940 MDTVEH, 4296VI, , WA, , , , , , , , , ,
/1951 *ASNCAS SS1940 \$SS13002202
/2008 REMINQ SS1940 MDTWANT, FLETCHER, SHIRLEY, L, 020558, , , WA, , , , , , , , , ,
/2009 REMINQ SS1940 MDTWANT, SHETLER, NATHAN, P, 022085, , , WA, , , , , , , , , ,
/2009 REMINQ SS1940 MDTWANT, , , , , , WA, SHETLNA154CO, , , , , , , , , ,
/2019 (SP0203) CLEAR SS1940 D/H
/2019 CLOSE SS1940

LSPD
ORIGIN